## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	s form should be used correspondence includi- ted below or directed of ations.	for transmitting the ISS ing the Patent, advance herwise in Block 1, by	SUE FEE and PUBLIC orders and notification (a) specifying a new co	ATION FEE (if requ of maintenance fees v rrespondence address	nired), Bloowill be ma ; and/or (b	cks 1 through 5 siled to the current indicating a sep	hould be completed correspondence ad- arate "FEE ADDRE	i where dress as ISS" for	
CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.								
23389	7590 11/29								
	OTT MURPHY & CITY PLAZA		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
Or it could be a second	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						(Deposito	r's name)	
							(S	ignature)	
			(Date)						
APPLICATION NO.	FILING DATE	,	FIRST NAMED INVENT	OR	ATTORNI	EY DOCKET NO.	CONFIRMATION	NO.	
09/691,802 10/19/2000			Hidehiro Matsumoto 13992 5759				<del></del>		
TITLE OF INVENTION WIRELESS CLIENT	ON: WIRELESS COM	MUNICATION SYSTE	EM AND METHOD C	F CHANGING LA	NGUAGE	TO BE DISPLA	YED IN		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	E FEE T	OTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1440	\$0	\$0		\$1440	02/29/2008	3	
EXAMINER		ART UNIT	CLASS-SUBCLASS						
CHAN, R	ICHARD	2618	455-414000						
1. Change of correspond	ence address or indicatio	n of "Fee Address" (37	2. For printing on th	e patent front page, lis	st				
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys 1 Scully, Scott, or agents OR, alternatively,						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  2 Murphy & Presser, P.C					<u>, P.</u> C.	
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)					
PLEASE NOTE: Unl recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NC	e data will appear on the DT a substitute for filing	e patent. If an assign an assignment.	ee is identi	fied below, the d	ocument has been fi	led for	
(A) NAME OF ASSIG	GNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
NEC Corpor	ation	Tokyo,	Japan						
Please check the appropr	iate assignee category or	categories (will not be p	printed on the patent):	☐ Individual 🎞 🖰	orporation o	or other private gro	up entity Gover	rnment	
4a. The following fee(s):	are submitted:	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.							
Publication Fee (N	To small entity discount p	Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 191013 (enclose an extra copy of this form).						
			overpayment, to De	posit Account Numbe	T910	13 (enclose a	extra copy of this f	orm).	
	<b>tus</b> (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no l	onger claiming SMAI	I ENTITY	/ status See 27 Cl	TD 1 27/a\/2\		
NOTE: The Issue Fee and interest as shown by the i			• • •	-			147 1 7	arty in	
Authorized Signature	[2][4]					25, 2008			
Typed or printed name	Paul J./	Esatto, Jr.		Registration N	o3	0,749			
This collection of inform application. Confident	ation is required by 37 C liality is governed by 35	FR 1.311. The informati U.S.C. 122 and 37 CFR	on is required to obtain of 1.14. This collection is	or retain a benefit by the estimated to take 12 n	ne public w	hich is to file (and complete, includin	by the USPTO to pr g gathering, preparir	rocess) ng, and	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.